STATE BOARD OF ACCOUNTS 302 West Washington Street Room E418 INDIANAPOLIS, INDIANA 46204-2769

AUDIT REPORT OF

PERRY COUNTY MEMORIAL HOSPITAL A COMPONENT UNIT OF PERRY COUNTY, INDIANA

January 1, 2007 to December 31, 2007





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HOSPITAL OFFICIALS

Office	<u>Official</u>	<u>Term</u>
Executive Director	Joseph Stuber	01-01-07 to 12-31-08
Treasurer	Kathy Clayton	01-01-07 to 12-31-08
Chairman of the Hospital Board	John B. Land	01-01-07 to 12-31-08
President of the Board of County Commissioners	Louis Fortwendel Gary Dauby	01-01-07 to 12-31-07 01-01-08 to 12-31-08



STATE BOARD OF ACCOUNTS 302 WEST WASHINGTON STREET ROOM E418 INDIANAPOLIS, INDIANA 46204-2769

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INDEPENDENT AUDITOR'S REPORT

TO: THE OFFICIALS OF THE PERRY COUNTY MEMORIAL HOSPITAL, PERRY COUNTY, INDIANA

We have audited the accompanying basic financial statements of the Perry County Memorial Hospital (Hospital), as of and for the year ended December 31, 2007, as listed in the Table of Contents. These financial statements are the responsibility of the Hospital's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above presents fairly, in all material respects, the financial position of the Hospital as of December 31, 2007, and the changes in financial position and cash flows, thereof for the year then ended in conformity with accounting principles generally accepted in the United States.

Management's Discussion and Analysis, as listed in the Table of Contents, is not a required part of the basic financial statements but is supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures, which consisted principally of inquiries of management regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

STATE BOARD OF ACCOUNTS

April 23, 2008



#1 Hospital Road Tell City, Indiana 47586 (812) 547-7011 www.pchospital.org

Management's Discussion and Analysis Perry County Memorial Hospital

Our discussion and analysis of Perry County Memorial Hospital's (PCMH) financial performance provides an overview of PCMH's financial activities for the fiscal year ended December 31, 2007. Please read it in conjunction with PCMH's financial statements and accompanying notes to the financial statements.

Using This Annual Report

This annual report consists of two parts—Management's Discussion and Analysis, and the Basic Financial Statements.

In the "Management Discussion and Analysis" section of this report the management of the hospital discusses various components of the annual report and provides an analysis of the current financial statement information.

The "Basic Financial Statement" section of this report includes a series of financial statements that provide information about the activities of PCMH as a whole. The Statement of Net Assets reveals the assets and liabilities of PCMH on December 31, 2007 while the Statement of Revenues, Expenses, and Changes in Net Assets summarize the changes in the assets and liabilities for the year then ended. The Statement of Cash Flows summarizes the change in cash and cash equivalents as a result of the financial activity during the year. The Notes to the Financial Statements disclose additional information addressed within the body of the financial statements.

Financial Highlights

With increased volumes and improved net patient revenues, fiscal year 2007 was a good year for Perry County Memorial Hospital (PCMH). The following report represents improvements in hospital operations as follows:

- Acute Care Discharges increased 9.0%
- Net Patient Revenue increased 8.0%
- Total Margin was 5.88%
- PCMH invested \$1,210,431 for Capital Equipment and Improvements in 2007
- Maximum Annual Debt Service coverage remains strong 3.75.
- Cash Not Restricted for Debt Service of \$12,238,850 is strong at 237 days cash on hand.
- During the year, PCMH made the following significant Capital Expenditures:
 - Surgery Camera Units (\$95,560)

Conveniently located in the center of your life.

- Dietary Tray System (\$24,674)
- Hemostasis System (\$34,995)
- Digital Mammography Unit (\$420,000)
- Surgery Table (\$35,743)
- Medical Vacuum System (\$26,460)
- 38 IV Pumps (\$89,571)
- 23 Park Avenue House (\$55,295)
- Radiographic Room (101,470)

Utilization

Total Inpatient Services have slightly increased volumes with NewBorn volumes decreasing. Acute Care Discharges have increased 6% from 2006 with an Average Length of Stay at 3.0 days and Acute Care Days were equivalent to 2006.

Imaging Procedures increased 11%; Emergency Room increased 3%; Physical Therapy/Occ therapy increased 4% and EMS volumes increased 15%. PCMH's Home Health Agency saw an 18% decrease in visits during the year and Laboratory Tests decreased 10%. Other services such as Surgery, Respiratory Therapy, and Outpatient Visits have slight decreases during the year.

Sources of Revenue

PCMH receives a significant portion of its revenues from government health programs, principally Medicare and Medicaid, which are highly regulated and subject to frequent and substantial changes. Revenues from the Medicare and Medicaid programs remained steady at 59.4% of gross revenues in 2007 from 60.0% in 2006.

	<u>2007</u>	<u>2006</u>
Medicare	46.8%	46.5%
Medicaid	12.6%	13.5%
Commercial	33.3%	34.2%
Private	7.3%	5.8%

Legislative changes continue to limit or reduce the levels of payments from these programs. The Hospital elected to be designated as a Critical Access Hospital effective July 1, 2004. Under this designation Medicare Services have been reimbursed at 101% of reasonable costs. The Indiana Medicaid Managed Care program has also had an impact on reimbursement and contractual allowance.

Operating Results

PCMH's Financial Operations resulted in an 8.39% Operating Margin of \$1,139,920. This was \$318,233 increase from prior year of \$821,687. This was related to a continued effort to remain competitive in the market and a change to a three tiered charity policy. PCMH's Total Margin was \$1,814,141 or 5.88% and Investment Earnings of \$758,484 were \$107,765 under prior year of \$866,249. This includes the Foundation Endowment and Memorial Fund Earnings.

Operating Expenses of \$26.8 million increased \$1.2 million or 4.8% from prior year. Salaries and Benefits increased \$71,357 which related to annual merit increases. Medical Fees increased \$309,432 for an increase in Physician services provided under arrangement. A Cardiologist continues seeing patients on a seven day a week schedule. Supply costs increased \$276,220 and Other Expenses increased \$342,590.

Balance Sheet

Hospital Operating Cash and Investments increased \$2,138,565 during the year. This was due to a continued increase in our collection efforts and unexpected increases in Patient Revenue. Non-current Cash and Investments decreased \$135,602 due to decreased earnings in the Equity Markets.

Accounts Receivable Days were equivalent to prior year at 63.4 days.

Long Term Debt to Capitalization Ratio is extremely favorable at 12.08% compared to the S&P-BBB of 40.70%. This reflects PCMH's strong Balance Sheet.

Cash Flows to Liabilities percentage experienced a change in 2007 to 40.83% compared to prior year of 47.32%. This is very favorable when compared to the S&P-BBB of 14.10%.

Cash to Long Term Debt Ratio remains extremely favorable as Cash and Investments exceed Long-Term Debt Ratio is 346.54% (S&P-BBB 80.40%).

Capital Assets

At the end of 2007 PCMH had approximately \$11,090,808 invested in Capital Assets. This represents a net decrease of \$219,684 that consists of \$1,210,431 in new Capital Purchases; Less: Assets retired for disposal or trade -in, \$345,298, an increase in Depreciation Expense to \$1,407,857, and an increase of CIP in the amount of \$11,091. Capital Assets consist of:

	2007	<u>2006</u>
Land	\$1,836,088	\$1,828,347
Land Improvements	\$1,359,291	\$1,328,965
Buildings	\$10,124,118	\$10,005,450
Equipment	\$12,986,766	\$12,278,368
Total	\$26,306,263	\$25,441,130
Less: Accumulated		
Depreciation	(\$15,303,686)	(\$14,207,778)
Subtotal	\$11,002,577	\$11,233,352
Construction-In-Progress	\$88,231	\$77,140
Capital Assets	\$11,090,808	\$11,310,492

Debt: PCMH acquired one additional loan financing in 2007. Loans and Capital Leases outstanding consisted of:

	<u>2007</u>	2006	
Capital Leases	\$88,266	\$208,613	
Mortgages Payable	\$317,231	\$347,569	
Loan Payable	\$3,685,365	\$3,823,393	
Total Debt	\$4,090,862	\$4,379,575	

PERRY COUNTY MEMORIAL HOSPITAL

Management Discussion and Analysis

Summarized Financial Statement Information related to the hospital activities for the last 2 years

STATEMENT OF NET ASSETS			Increase
	2007	2006	Decrease
CURRENT ASSETS:			
Cash and cash equivalents	\$9,852,661	\$7,959,580	\$1,893,081
Investments	2,386,189	2,140,705	245,484
Patient accounts receivable net of allowance	5,312,205	4,526,754	785,451
Accounts receivable	248,493	475,588	(227,095)
Supplies and other current assets	1,013,385	1,036,880	(23,495)
Noncurrent cash and investments	2,416,376	3,085,925	(669,549)
Other long-term investments	805,151	0	805,151
Capital assets:			,
Land and Construction in progress	1,924,319	1,905,487	18,832
Depreciable capital assets, net of accumulated depreciation	9,166,489	9,405,005	(238,516)
Other Assets	25,000	25,000	0
TOTAL ASSETS	\$33,150,268	\$30,560,924	\$2,589,344
LIABILITIES & NET ASSETS			
Current Portion - LTD	654,425	994,178	(339,753)
Accounts payable and accrued expenses	1,274,477	871,191	403,286
Estimated third-party payor settlements	845,325	405,999	439,326
Other Current Liabilities	785,248	563,945	221,303
Long-term debt, net of current maturities	3,436,437	3,385,397	51,040
TOTAL LIABILITIES	6,995,912	6,220,710	775,202
Invested in capital assets, net of related debt	7,024,946	6,955,917	69,029
Unrestricted	19,129,410	17,384,297	1,745,113
TOTAL NET ASSETS	26,154,356	24,340,214	1,814,142
TOTAL LIABILITIES AND NET ASSETS	\$33,150,268	\$30,560,924	\$2,589,344

PERRY COUNTY MEMORIAL HOSPITAL

Management Discussion and Analysis

Summarized Financial Statement Information related to the hospital activities for the last 2 years

CHANGES IN NET ASSETS			Increase
	2007	2006	Decrease
PATIENT REVENUES:			***************************************
Inpatient Services	\$16,488,489	\$15,146,103	\$1,342,386
Outpatient Services	35,623,931	32,615,656	3,008,275
Total Patient Revenue	52,112,420	47,761,759	4,350,661
DEDUCTIONS FROM REVENUE:			
Contractual Provision	23,687,850	21,946,715	1,741,135
Charity and Uncompensated Care	3,775,214	2,997,317	777,897
Net Patient Revenue	24,649,356	22,817,727	1,831,629
Other Operating Revenue	3,308,428	3,587,152	(278,724)
Net Operating Revenue	27,957,784	26,404,879	1,552,905
OPERATING EXPENSES:			
Salaries & benefits	12,923,891	12,852,534	71,357
Medical professional Fees	1,566,956	1,257,524	309,432
Supplies, food, and drugs	3,478,778	3,202,558	276,220
Depreciation and amortization	1,407,857	1,335,700	72,157
Contracted services	2,716,741	2,553,825	162,916
Other expenses	4,723,641	4,381,051	342,590
Total Expenses	26,817,864	25,583,192	1,234,672
Operating Income	1,139,920	821,687	318,233
Nonoperating Income (Expenses)			
Investment income	758,484	866,249	(107,765)
Interest expense	(197,897)	(206,478)	8,581
Noncepital grants and contributions	300,344	212,006	88,338
Other	(186,710)	(85,650)	(101,060)
Net Nonoperating Income	674,221	786,127	(111,906)
Net income/(Loss) After investments	\$1,814,141	\$1,607,814	\$206,327

PERRY COUNTY MEMORIAL HOSPITAL Management Discussion and Analysis Summary of key Operating Statistics and Ratio Analysis

OPERATI	ING STATISTICS		Percentage
AND AND A CONTRACT OF THE AND ADDRESS OF THE ADDRES	2007	2006	Change
<u>DISCHARGES</u>			
Acute Care	1,382	1,271	9%
Swing Bed	102	102	0%
New Born	78	94	-17%
TOTAL DISCHARGES	1,562	1,467	6%
PATIENT DAYS:			
Acute Care	4,172	4,080	2%
Swing Bed	851	831	2%
New Born	181	223	-19%
TOTAL PATIENT DAYS	5,204	5,134	1%
% UTILIZATION:			
Medicare	65.4%	64.2%	1.2%
Medicaid	11.7%	13.6%	-1.9%
Commercial	18.5%	17.9%	0.6%
Private Pay	4.4%	4.3%	0.0%
AVERAGE LENGTH OF STAY:			
Acute Care	3.0	3.2	
Swing Bed	8.3	8.1	
Newborn	2.3	2.4	
OTHER OPERATING STATISTICS			
Surgical Operations	1,272	1,291	-1%
Laboratory Tests	97,246	107,668	-10%
Physical Therapy/Occ Therapy Tr	21,692	20,927	4%
Imaging Procedures	19,177	17,304	11%
Respiratory Therapy Treatments	63,263	65,040	-3%
Emergency Room Visits	9,688	9,414	3%
Outpatient Visits	58,981	61,468	-4%
Home Health Visits	2,589	3,142	-18%
EMS Trips	1,560	1,353	15%

PERRY COUNTY MEMORIAL HOSPITAL Management Discussion and Analysis Summary of key Operating Statistics and Ratio Analysis

	S&P		
Manager and American	888	2007	2006
Operating Margin % (Operating Income/Net Operating Revenue)	1.40%	8.39%	3.11%
Total Margin % (Net Income/Net Operating Revenue)	2.70%	5.88%	6.09%
Total EBIDA Margin % (Net Income + Interest + Depreciation / Net R	10.10% ?evenue)	10.87%	11.85%
Days of Cash on Hand (Cash / (Operating Expense-Depreciation)/36	11 1 5	237	211
Days in Accounts Receivable (Net A/R / Net Average Daily Revenue)	51.50	63.40	63.50
Labor Costs to Net Revenue % (Salaries + Benefits) / Net Operating Revenue	53.20% e	38.26%	48.67%
Supply Costs to Net Revenue % (Supplies / Net Operating Revenue)	N/A	11.63%	12.13%
Long Term Debt to Capitalization % (Long Term Debt / (Fund Balance + Long Ter	40.70% m Debt)	12.08%	12.21%
Maxium Annual Debt Service Cove (Net Income + Interest + Depreciation + Amor	2.80 tization) / Debt Serv	3.75 ice	4.54
Cash Flows to Liabilities % (Net Income + Depreciation + Amortization) /	14.10% Total Liabilities	40.83%	47.32%
Cash to Debt (Cash / Long Term Debt)	80.40%	346.54%	298.35%
Average Age of Plant (Years) (Accumulated Depreciation / Depreciation)	10.10	10.87	10.64

PERRY COUNTY MEMORIAL HOSPITAL STATEMENT OF NET ASSETS December 31, 2007

<u>Assets</u>

Current assets:		
Cash and cash equivalents	\$	9,852,661
Short-term investments		2,386,189
Patient accounts receivable, net of		
estimated uncollectibles		5,312,205
Accounts receivable		248,493
Supplies and other current assets		1,013,385
Noncurrent cash and investments:		,,
Internally designated		2,416,376
Other long-term investments		805,151
Capital assets:		000,107
Land and construction work in progress		1,924,319
Depreciable capital assets, net of accumulated depreciation		9,166,489
Other assets		25,000
	*******	20,000
Total assets	\$	33,150,268
100010		33,130,200
1 September 1 About A and a		
<u>Liabilities and Net Assets</u>		
Current liabilities:		
Current maturities of long-term debt	\$	654,425
Accounts payable and accrued expenses	Ψ	1,274,477
Estimated third-party payor settlements		845,325
Other current liabilities		785,248
Long-term debt, net of current maturities		
Long-term debt, fiet of current maturiles		3,436,437
Total liabilities		6,995,912
Total nasmico		0,333,312
Net assets:		
Invested in capital assets, net of related debt		7,024,946
Unrestricted		19,129,410
		13,123,410
Total net assets		26,154,356
		20,.04,000
Total liabilities and net assets	\$	33,150,268

The accompanying notes are an integral part of the financial statements.

PERRY COUNTY MEMORIAL HOSPITAL STATEMENT OF REVENUES, EXPENSES, AND CHANGES IN NET ASSETS Year Ended December 31, 2007

Operating revenues:	
Net patient service revenue (net of provision for bad debt)	\$ 24,649,357
Other	3,308,428
Total operating revenues	27,957,785
Operating expenses:	
Salaries and benefits	12,923,891
Medical professional fees	1,566,956
Medical supplies and drugs	2,266,062
Insurance	407,600
Other supplies	1,073,958
Food	138,758
Utilities	515,756
Depreciation and amortization	1,407,857
Contracted services	2,716,741
Service agreements	614,669
Repair and maintenance	100,343
Other expenses	3,085,273
Total operating expenses	26,817,864
Operating income	1,139,921
Nonoperating revenues (expenses): Investment income	750 404
	758,484
Investment expense	(197,897)
Noncapital grants and contributions	300,344
Other	(186,710)
Total nonoperating revenues	674,221
Increase in net assets	1,814,142
Net assets beginning of the year	24,340,214
,	
Net assets end of the year	\$ 26,154,356

The accompanying notes are an integral part of the financial statements.

PERRY COUNTY MEMORIAL HOSPITAL STATEMENT OF CASH FLOWS Year Ended December 31, 2007

Cash flows from operating activities:	
Receipts from and on behalf of patients	\$ 23,863,906
Payments to suppliers and contractors	(8,307,641)
Payments to employees	(12,923,891)
Other receipts and payments, net	444,458
Net cash provided by operating activities	3,076,832
The state provided by opending delivings	3,070,032
Cash flows from capital and related financing activities:	
Capital grants and contributions	300,344
Principal paid on long-term debt	(708,713)
Interest paid on long-term debt	(197,897)
Purchase of capital assets	(768,172)
Net cash used by capital and related financing activities	(1,374,438)
Cash flows from investing activities:	
Interest and dividends on investments	571,774
Net proceeds from investing activities	(356,373)
. ,	1000,373)
Net cash provided by investing activities	215,401
Net increase in cash and cash equivalents	1,917,795
Cash and cash equivalents at beginning of year	8,545,651
Cash and cash equivalents at end of year	\$ 10,463,446
Proposition of each and each an instant to the Classes of the A	
Reconciliation of cash and cash equivalents to the Statement of Net Assets:	
Cash and cash equivalents in current assets	\$ 9,852,661
Restricted cash and cash equivalents	610,785
Total cash and cash equivalents	<u>\$ 10,463,446</u>
Reconciliation of operating income to net cash provided by operating activities:	
Operating income	\$ 1,139,921
Adjustments to reconcile operating income to net cash flows used in operating activities:	
Depreciation and amortization	1,407,857
Provision for bad debts	2,997,230
(Increase) decrease in current assets:	
Patient accounts receivable	(3,782,681)
Accounts receivable	227,095
Supplies and other current assets	23,495
Increase in current liabilities:	
Accounts payable and accrued expenses	403,286
Other current liabilities	221,303
Estimated third-party payor settlements	439,326
Net cash provided in operating activities	\$ 3,076,832

Noncash investing, capital, and financing activities:

The Hospital entered into a loan agreement of \$420,000 for new equipment in 2007.

The accompanying notes are an integral part of the financial statements.

I. Summary of Significant Accounting Policies

A. Reporting Entity

Perry County Memorial Hospital (Hospital) is a county-owned facility and operates under the Indiana County Hospital Law, Indiana Code 16-22. The Hospital provides short-term inpatient and outpatient health care.

The Board of County Commissioners of Perry County appoints the Governing Board of the Hospital and a financial benefit/burden relationship exists between the County and the Hospital. For these reasons, the Hospital is considered a component unit of Perry County.

On September 7, 1971, the Board of County Commissioners of Perry County, upon written request of the Hospital Board of Trustees, created the Perry County Memorial Hospital Association. The Association was created pursuant to the provisions of Indiana Code 16-22-6 for the exclusive purpose of financing and constructing hospital facilities for the Hospital.

The accompanying financial statements present the activities of the Hospital (primary government) and its significant component units. The component units discussed below are included in the Hospital's reporting entity because of the significance of their operational or financial relationships with the Hospital. Blended component units, although legally separate entities, are in substance part of the government's operations and exist solely to provide services for the government; data from these units is combined with data of the primary government. Discretely presented component units are involved in activities of an operational nature independent from the government; their transactions are reported in a separate column in the basic financial statements to emphasize that it is legally separate from the Hospital.

Blended Component Units

The Perry County Memorial Hospital Foundation is a significant blended component unit of the Hospital. The primary government appoints a voting majority of the Foundation's board. Although it is legally separate from the Hospital, the Foundation is reported as if it were a part of the Hospital because it provides services entirely or almost entirely to the Hospital.

B. Enterprise Fund Accounting

The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus. Based on Governmental Accounting Standards Board (GASB) Statement No. 20, Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting, as amended, the Hospital has elected to apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB), including those issued after November 30, 1989, that do not conflict with or contradict GASB pronouncements.

C. Assets, Liabilities and Net Assets or Equity

1. Deposits and Investments

Cash and cash equivalents include demand deposits and investments in highly liquid debt instruments with an original maturity date of three months or less.

Short-term investments are investments with remaining maturities of up to 90 days.

Statutes authorize the Hospital to invest in interest-bearing deposit accounts, passbook savings accounts, certificates of deposit, money market deposit accounts, mutual funds, pooled fund investments, securities backed by the full faith and credit of the United States Treasury and repurchase agreements. The statutes require that repurchase agreements be fully collateralized by U.S. Government or U.S. Government Agency obligations.

Nonparticipating certificates of deposit, demand deposits, and similar nonparticipating negotiable instruments that are not reported as cash and cash equivalents are reported as investments at cost.

Debt securities are reported at fair value. Debt securities are defined as securities backed by the full faith and credit of the United States Treasury or fully insured or guaranteed by the United States or any United States government agency.

Open-end mutual funds are reported at fair value.

Money market investments that mature within one year or less at the date of their acquisition are reported at amortized cost. Other money market investments are reported at fair value.

Other investments are generally reported at fair value.

Investment income, including changes in the fair value of investments, is reported as nonoperating revenues in the statement of revenues, expenses, and changes in net assets.

2. Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

3. Capital Assets

Capital assets, which include land, land improvements, buildings and improvements, and equipment, are reported at actual or estimated historical cost based on appraisals or deflated current replacement cost. Contributed or donated assets are reported at estimated fair value at the time received.

Capitalization thresholds (the dollar values above which asset acquisitions are added to the capital asset accounts), depreciation methods and estimated useful lives of capital assets reported in the financial statements are as follows:

	,	italization reshold	Depreciation Method	Estimated Useful Life
Land improvements Buildings and improvements Equipment	\$	5,000 5,000 5,000	Straight-line Straight-line Straight-line	2 to 20 years 25 to 45 years 5 to 20 years

For depreciated assets, the cost of normal maintenance and repairs that do not add to the value of the asset or materially extend asset lives are not capitalized.

Major outlays for capital assets and improvements are capitalized as projects are constructed. Interest incurred during the construction phase of capital assets is included as part of the capitalized value of the assets constructed.

4. Net Assets

Net assets of the Hospital are classified in two components.

Net assets invested in capital assets net of related debt consist of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets.

Unrestricted net assets are remaining net assets that do not meet the definition of invested in capital assets net of related debt or restricted.

D. Grants and Contributions

From time to time, the Hospital receives grants from Perry County and the State of Indiana as well as contributions from individuals and private organizations. Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements, including time requirements are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as nonoperating revenues. Amounts restricted to capital acquisitions are reported after nonoperating revenues and expenses.

E. Operating Revenues and Expenses

The Hospital's Statement of Revenues, Expenses and Changes in Net Assets distinguishes between operating and nonoperating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services – the Hospital's principal activity. Nonexchange revenues, including grants, and contributions received for purposes other than capital asset acquisition, are reported as nonoperating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

F. Compensated Absences

1. Sick Leave

Hospital employees earn sick leave at the rate of 12 days per year. Unused sick leave may be accumulated to a maximum of 30 days. Accumulated sick leave is not paid to employees upon retirement or termination.

2. Vacation Leave

Hospital employees earn vacation leave at rates from 5 days to 25 days per year based upon the number of years of service. One year of employment must be completed before taking vacation leave and, generally, vacation leave must be taken during each year. Unused vacation leave is paid to employees through cash payment upon termination.

Vacation leave is accrued when incurred and reported as a liability.

No liability is reported for sick leave.

II. Detailed Notes

A. Deposits and Investments

1. Deposits

Custodial credit risk is the risk that, in the event of a bank failure, the government's deposits may not be returned to it. Indiana Code 16-22-3-16 requires only that money in the hospital funds be deposited in the manner determined by the governing board. The Hospital does not have a formal policy regarding custodial credit risk for deposits. At December 31, 2007, the Hospital had deposit balances in the amount of \$10,123,167. Of this amount, \$220,958 was uninsured and uncollateralized. The remaining bank balances were insured by the Federal Deposit Insurance Corporation or the Public Deposit Insurance Fund, which covers all public funds held in approved depositories.

2. Investments

As of December 31, 2007, the Hospital had the following investments:

	G	Primary overnment	Investm	ent N	Maturities	(in	Years)	
Investment Type		Market Value	 Less Than 1		1-2	_	More Than 2	_
Corporate bonds Mutual funds	\$	178,168 4,671,399	\$ 178,168 -	\$		- -	\$	
Totals	\$	4,849,567	\$ 178,168	\$		_	\$	

Statutory Authorization for Investments

Indiana Code 16-22-3-20 authorizes the Hospital to invest in: 1) any interest bearing account that is authorized to be set up and offered by a financial institution or brokerage firm registered and authorized to do business in Indiana; 2) repurchase or resale agreements involving the purchase and guaranteed resale of any interest bearing obligations issued or fully insured or guaranteed by the United States or any United States government agency in which type of agreement the amount of money must be fully collateralized by interest bearing obligations as determined by the current market value computed on the day the agreement is effective; 3) mutual funds offered by a financial institution or brokerage firm registered and authorized to do business in Indiana; 4) securities backed by the full faith and credit of the United States Treasury or fully insured or guaranteed by the United States or any United States government agency; or 5) pooled fund investments for participating hospitals offered, managed, and administered by a financial institution or brokerage firm registered or authorized to do business in Indiana.

Investment Custodial Credit Risk

The custodial credit risk for investments is the risk that, in the event of the failure of the counterparty to a transaction, a government will not be able to recover the value of investment or collateral securities that are in the possession of an outside party. The Hospital does not have a formal policy for custodial credit risk for investments. At December 31, 2007, the Hospital held investments in corporation bonds in the amount of \$178,168. Of these investments \$178,168 were held by the counterparty's trust department or agent but not in the Hospital's name.

Interest Rate Risk

Interest rate risk is the risk that changes in interest rates will adversely affect the fair value of an investment.

Credit Risk

Credit risk is the risk that an issuer or other counterparty to an investment will not fulfill its obligations. The distribution of securities with credit ratings is summarized below.

	Н	lospital's
Standard	_Inv	estments
and Poor's	С	orporate
Rating		Bonds
AA	\$	100,984
Unrated		77,184
~~~ _ 1 _ 1	Φ.	470 400
Total	<u>\$</u>	178,168

### Concentration of Credit Risk

Concentration of credit risk is the risk of loss attributed to the magnitude of a Hospital's investment in a single issuer. The Hospital does not have a policy in regards to concentration of credit risk. United States of America government and United States of America governmental agency securities are exempt from this policy requirement.

The Hospital held the following investments that were exposed to concentration of credit risk:

Issuer	Dece	mber 31, 2007
T. Rowe Price Funds Mutual Funds held at Edward Jones Mutual Funds held at Fifth Third Securities	\$	704,167 1,987,746 1,979,486
Total	\$	4,671,399

### Foreign Currency Risk

The Hospital does not have a formal policy in regards to foreign currency risk.

### B. Accounts Receivable and Payable

Patient accounts receivable and accounts payable (including accrued expenses) reported as current assets and liabilities by the Hospital at year end consisted of these amounts:

### Patient Accounts Receivable

Receivable from patients and their insurance carriers Receivable from Medicare Receivable from Medicaid	\$ 4,657,203 2,728,556 795,503
Total patient accounts receivable	8,181,262
Less allowance for uncollectible amounts	 2,869,057
Patient accounts receivable, net	\$ 5,312,205
Accounts Payable and Accrued Expenses	
Payable to employees (including payroll taxes) Payable to suppliers Other	\$ 785,248 1,274,477 845,325
Total accounts payable and accrued expenses	\$ 2,905,050

### C. Capital Assets

Capital asset activity for the year ended December 31, 2007, was as follows:

	Beginning Balance	Increases	Decreases	Ending Balance
Capital assets, not being depreciated:				
Land	\$ 1,828,347	\$ 7,741	\$ -	\$ 1,836,088
Construction in progress	77,140	687,354	676,263	88,231
Total capital assets, not				
being depreciated	1,905,487	695,095	676,263	1,924,319
Capital assets, being depreciated:				
Land improvements	1,328,965	30,326	-	1,359,291
Buildings and improvements	10,005,450	118,668		10,124,118
Equipment	12,278,368	1,037,127	328,729	12,986,766
Totals	23,612,783	1,186,121	328,729	24,470,175

	Beginning Balance	Increases	Decreases	Ending Balance
Capital assets, being depreciated (continued):				
Less accumulated depreciation for:				
Land improvements	1,031,715	33,644	_	1,065,359
Buildings and improvements	4,312,039	349,322	_	4,661,361
Equipment	8,864,024	1,024,891	311,949	9,576,966
Totals	14,207,778	1,407,857	311,949	15,303,686
Total capital assets, being				
depreciated, net	9,405,005	(221,736)	16,780	9,166,489
Total primary government capital assets, net	\$ 11,310,492	\$ 473,359	\$ 693,043	\$ 11,090,808

### D. Construction Commitments

Construction work in progress is composed of the following:

<u>Project</u>	Total Project Ithorized	pended to ember 31, 2007	Comm	itted	Required Future Funding
Master planning Ultrasound	\$ 84,634 3,597	\$ 84,634 3,597	\$	<u>-</u>	\$ -
Totals	\$ 88,231	\$ 88,231	\$		\$ -

### E. Capital Leases

The Hospital has entered into various capital leases for equipment. Future minimum lease payments and present values of the net minimum lease payments under these capital leases as of yearend, are as follows:

2008 2009 2010	\$ 49,551 39,918 3,326
Total minimum lease payments	 92,795
Less amount representing interest	4,529
Present value of net minimum lease payments	\$ 88,266

Assets acquired through capital leases still in effect are as follows:

Total	<del></del>	142,794
Equipment Accumulated depreciation	\$	606,084 463,290

### F. Long-Term Liabilities

### 1. Mortgages and Loans Payable

The Hospital has entered into various mortgages and loans. Annual debt service requirements to maturity including interest of \$640,665, are as follows:

2008	\$	781,162
2009		762,201
2010		762,201
2011		762,200
2012		668,516
2013-2017		906,981
Total	\$ 4,	643,261

### 2. Changes in Long-Term Liabilities

Long-term liability activity for the year ended December 31, 2007, was as follows:

		Beginning Balance		Additions		Reductions		Ending Balance		Due Within One Year	
Capital leases Mortgage payable Loans payable	\$	208,613 347,569 3,823,393	\$	420,000	\$	120,347 30,338 558,028	\$	88,266 317,231 3,685,365	\$	46,292 32,140 575,993	
Total long-term liabilities	\$	4,379,575	\$	420,000	\$	708,713	\$	4,090,862	\$	654,425	

### G. Charity Care

Charges excluded from revenue under the Hospital's charity care policy were \$777,984 for 2007.

### H. Internally Designated Assets

Noncurrent cash and investments internally designated include the following:

 Funded Depreciation – Amounts transferred from the Operating Fund by the Hospital Board of Trustees through funding depreciation expense. Such amounts are to be used for equipment and building, remodeling, repairing, replacing or making additions to the Hospital buildings as authorized by Indiana Code 16-22-3-13.

2. Designated Funds – Assets set aside by the Hospital Board of Trustees for identified purposes and over which the Board retains control and may, at its discretion, subsequently use for other purposes.

Internally designated: Funded depreciation:	
Cash and cash equivalents	\$ 292,327
Investments	1,650,591
Total funded depreciation	1,942,918
Board designation:	
Cash and cash equivalents	318,458
Scholarship Fund	55,000
Endowment Fund	100,000
Total board designation	473,458
Total internally designated	\$ 2,416,376

### III. Other Information

### A. Risk Management

The Hospital is exposed to various risks of loss related to torts; theft of, damage to, and destruction of assets; errors and omissions; job related illnesses or injuries to employees; medical benefits to employees, retirees, and dependents (excluding postemployment benefits); and natural disasters.

The risks of torts; theft of, damage to, and destruction of assets; errors and omissions; job related illnesses or injuries to employees; and natural disasters are covered by commercial insurance from independent third parties. Settled claims from these risks have not exceeded commercial insurance coverage for the past three years. There were no significant reductions in insurance by major category of risk.

### Medical Benefits to Employees, Retirees and Dependents (Excluding Postemployment Benefits)

The Hospital has contracted with a Third Party to administer the Perry County Memorial Hospital Employee Benefit Trust, an account created to service employee health benefit claims and administrative costs of the program. This is a pay as you go system and claims are expensed as incurred. An excess policy through commercial insurance covers individual claims in excess of \$35,000 per year. Settled claims resulting from this risk did not exceed commercial insurance coverage in the past three years. A premium is charged to each fund that accounts for employee payroll. This total charge is calculated using trends in actual claims experience.

### B. Subsequent Events

The Hospital has purchased a new IBM computer including training, for \$233,900 and has entered into a new lease agreement for an Omnicell Automated Dispensing Cabinet and service agreement for \$229,348 over the next five years.

### C. Contingent Liabilities

### Litigation

The Hospital is involved in litigation and regulatory investigations arising in the course of business. After consultation with legal counsel, management estimates that these matters will be resolved without material adverse effect on the Hospital's future financial position or results from operations.

### D. Fair Value of Financial Instruments

The following methods and assumptions were used by the Hospital in estimating the fair value of its financial instruments:

### Cash and Cash Equivalents

The carrying amount reported in the statement of net assets for cash and cash equivalents approximates its fair value.

### Short-Term Investments

The carrying amount reported in the statement of net assets is the investment's fair value on the day it becomes a short-term investment.

### Investments

Fair values, which are the amounts reported in the statement of net assets, are based on quoted market prices, if available, or are estimated using quoted market prices for similar securities.

### Accounts Payable and Accrued Expenses

The carrying amount reported in the statement of net assets for accounts payable and accrued expenses approximates its fair value.

### Estimated Third-Party Payor Settlements

The carrying amount reported in the statement of net assets for estimated third-party payor settlements approximates its fair value.

#### E. Pension Plan

### Defined Contribution Pension Plan

### Plan Description

The Hospital has a defined contribution pension plan administered by Plan Administrators as authorized by Indiana Code 16-22-3-11. The plan provides retirement, disability, and death benefits to plan members and beneficiaries. The plan was established by written agreement between the Hospital Board of Trustees and the Plan Administrator. The Plan Administrator issues a publicly available financial report that includes financial statements and required supplementary information of the plan. That report may be obtained by contacting:

Plan Administrators, Inc. 115 S. Wisconsin Street Depere, WI 54775-2765 Ph. (920)337-9906

### Funding Policy and Annual Pension Cost

The contribution requirements of plan members are established by the written agreement between the Hospital Board of Trustees and the Plan Administrator. Plan members are required to contribute 3% of the annual covered salary plus an optional 3% matching contribution. Employer and employee contributions to the plan were \$486,924 and \$307,573, respectively.

### F. Ambulance Service Subsidy

Perry County Memorial Hospital provides ambulance service for Perry County residents, including the cities of Cannelton and Tell City, through an agreement dated July 1986. The agreement provides that Perry County is to reimburse the Hospital, on monthly basis, for the amount that expenses exceeded revenues for the period. During 2007, the County reimbursed the Hospital \$90,000 for ambulance services.

This amount is included in the financial statements in other operating revenue.

### PERRY COUNTY MEMORIAL HOSPITAL EXIT CONFERENCE

The contents of this report were discussed on April 23, 2008, with Joseph Stuber, Executive Director; and Kathy Clayton, Treasurer. Our audit disclosed no material items that warrant comment at this time.

Separate phone exit conferences were held with Board members: Dr. Joe LeClere, Grant Taylor, Don Etienne, John B. Land, Tim Harding, and Rita Mahoney.